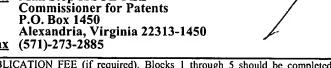
PART B - FEE(S) TRANSMITTAL

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2/06/2008 WASFAW2 00000002 10826839					William W. Haefliger (Depositor's name)				
FC:2501 FC:1504	720.00 DP 300.00 DP				February 1, 2008 (Date				
PPLICATION NO.	FILING DATE	FIRST NAMED INVEN		NTOR	OR ATTORNEY DOCKET NO.			CONFIRMATION NO.	
10/826,839	04/19/2004	004 Alex K. Gendall			12,606 2092				
E OF INVENTION: QUICK ADJUSTMENT BANDANA DEVICE									
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE I	DUE	PREV. PAID ISSUI	E FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$720	\$300		\$0		\$1020	02/29/2008	
EXAMINER ART UNIT			CLASS-SUBCLAS	s					
QUINN, RIC	002-207000	002-207000							
Change of corresponde CFR 1.363). Change of corresponders form PTO/SE "Fee Address" ind PTO/SB/47; Rev 03-0 Number is required.	(1) the names of or agents OR, alte (2) the name of a registered attorner 2 registered paten	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 1William W.Haefliger 2 3							
ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) DISEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for cordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) (B) RESIDENCE: (CITY and STATE OR COUNTRY) (B) RESIDENCE: (CITY and STATE OR COUNTRY)									
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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.									
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Authorized Signature	William W	V / ~			Date Feb	. 1,	2008		
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